

»» Defining International Standards in Medical Education – A WFME Project

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The urgent need for radical changes and innovations in basic (undergraduate) medical education has been emphasized in several recent reports [1,2,3,4,5]. However, for various reasons development has proceeded slowly, partly determined by political, social-economic and cultural factors, and partly by institutional and personal factors, including conservatism and faculty inertia.

To facilitate the necessary action, The World Federation for Medical Education (WFME) has recently decided to extend implementation of its educational policy [6,7] to the institutional level, i.e. the medical schools.

This new WFME project on „International Standards in Medical Education. Assessment and Accreditation of Medical Schools' Educational Programmes“ [8], has two main intentions:

- to stimulate medical schools to formulate their own plans for change and for quality improvement to attain with international standards.
- to establish a system of national and international assessment and accreditation of medical schools to assure minimum quality standards for medical school programmes, and thereby to safeguard practice in medicine and medical manpower utilization, and its increasing internationalization.

Only a minority out of the 1500 medical schools world-wide are subject to external assessment and accreditation procedures. This causes major concern when need for reform is well documented. The rapid increase in number of new medical schools within the last decades, many established on an insufficient basis (e.g. some private „for profit“ schools), adds to the disquiet.

A decision central to the new WFME strategy is to give priority to the task of specifying international standards or guidelines for medical education both in terms of the institutions and of their educational programmes. Provision of such standards will constitute a new framework against which medical schools could measure themselves. National assessment and accreditation of medical schools and their educational programmes will result, extended in the future to an international system.

A core of international standards can be defined. This requirement is in no way reduced by variations in medical education, whether due to differences in teaching tradition, culture, socio-economic potential, the health and disease spectrum or different forms of health care delivery systems. The scientific basis of medicine is common and the global task of education everywhere is the provision of health care. The core of the medical curriculum must be centred on the fundamental theory and practice of medicine, specifically basic biomedical, behavioural and social sciences, general clinical skills, clinical decision skills, communication abilities and medical ethics.

This set of core standards can of course be modified or supplemented according to regional, national and institutional needs and priorities. WFME has no interest in fostering uniformity of educational programmes. Moreover, because definition of minimum standards could have a levelling effect on quality, guidance on how the programme could be improved must be a component in evaluation of programmes on the basis of international standards.

WFME is now setting up an international Task Force of experts in medical education [9] in order to define international standards as described. The composition of the group will be balanced to cover medical education aspects in all six WFME Regions, represented by the Regional Associations for Medical Education. The Task Force will also include experts from institutions with experience of national standards and assessment. Furthermore, international agencies with responsibility for the quality of medical education should be represented.

In the future, the WFME project should not be confined to basic medical education. Similar provisions could be made in specialist training and continuing medical education; medical education should always be considered as a continuum.

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